U S Department of Labor Office of Labor Management Standards Washington DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No 1215-0188 Expires 11 30-2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440

For Official Use Only  Rect  READ THE INSTRUCTIONS CAREFUL  READ THE INSTRUCTION CAREFUL  READ THE INSTRUCTION CAREFUL  READ THE INSTRUCTION CAREFUL  READ	LY BEFORE PREPARING THIS REPORT			
1 File Number U 9482	2 Fiscal Year Covered From			
	1 / 1 / 2004 Through 12 / 31 / 2004			
3 Name and address of person filing	4 Name file number and address of labor organization			
Name Gerald F Gross	Name Teamsters Local Union NO 653			
	Labor Organization File Number 037664			
P O Box Bidg Room No If any	P O Box Building and Room Number if any			
Street 15 Macy Avenue	Street 4 Hampden Drive			
City Brockton	City South Easton			
State Massachusetts ZIP Code + 4 02302	State Massachusetts ZIP Code + 4 02375			
5 Position in labor organization				
Principal Officer				
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)				
A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent				
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income			
Name				
Trade Name of any				
—PO Box Bidg Room No ⁻if any				
Chart	7 b Amount			
Street	,			
City				
State ZIP Code + 4				
Signature				
15 Signature and verification. The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions.)				
Signed Seuld From	on 8-11-05 508 941 4041			
1 ' (	Date Telephone Number			

Name of Person Filing Gerald F Gross	File Number U			
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested				
8 Name and address of Business (including trade name if any)  Name  Trade Name if any  P O Box Bldg Room No if any  Street  City  State  ZIP Code + 4	9 Business deals with  a Labor Organization b Trust c Employer			
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing			
Name Trade Name if any PO Box Bidg Room No if any Street ZIP Code + 4	11 b Approximate dollar value of such dealing 12 a Nature of interest held or income received  12 b Amount			
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value				
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment 5/6/04 Golf at Pine Hills	\$65 00		
Name Blue Cross Blue Shield of Massachusetts	9/24/04 Golf at Pine Hills	\$103 50		
Trade Name if any	10/17/04 New England Patrio	ts -		
PO Box Bldg Room No Ifany Landmark Center	2 @ \$100 00 each			
Street 401 Park Drive				
City Boston				
State Massachusetts ZIP Code + 4 02215-3326				
13 b Is the Business an Employer or Consultant XX ?	14 b Amount of payment	\$368 50		



Tresidents Club

Gerry King Account Executive Labor Affairs Health and Welfare Funds

Tel (617) 246-7908 Fax (617) 246-5770 charles king@bcbsma com

Landmark Center 401 Park Drive Boston MA 02215 3326

July 25, 2005

Mr Gerry Gross, Principal Officer Teamsters Local 653 4A Hampden drive South Easton, Ma 02375

**Dear Gerry** 

The following is what our records show regarding information for the Labor-Management Reporting and Disclosure Act

Date	Activity	Amount
May 6, 2004	Golf at Pine Hills	\$65
September 24, 2004	Golf at Pine Hills	\$103 50
October 17, 2004	New England Patriots	2 @ \$100 each

Gerry if there are any questions or this does not jive with your records, please give me a call

Sincerely,

Gerry King